

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

(2)

PLAINTIFF UNITED STATES OF AMERICA	COURT CASE NUMBER 2:07cv3361-MHT
DEFENDANT LYNNE BRACKINS	TYPE OF PROCESS Application, Affidavit, Writ or Garnishment

SERVE	RECEIVED 2008 MAR 5 P 12:54
AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SUPERIOR BANK, ATTN: Ellen Casey
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 17 N. 20th Street, Birmingham, AL 35203

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285 3
U. S. Attorney's Office ATTN: A. Gardner P. O. Box 197 Montgomery, AL 36101	Number of parties to be served in this case 3
RETURNED AND FILED MAR 21 2008	
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*)

Fold Fold
CLERK
U. S. DISTRICT COURT
MIDDLE DIST. OF ALA.
DOB: 3/23/60
SSN: XXX-XX-4451

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	(334) 223-7280	2/12/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin No. <u>2</u>	District to Serve No. <u>1</u>	Signature of Authorized USMS Deputy or Clerk <u>K. Chavers</u>	Date <u>2/25/08</u>
					Date <u>2/14/08</u>

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (<i>if not shown above</i>) <u>Bill Caughran, General Counsel</u>	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (<i>complete only different than shown above</i>) <u>Same as above</u>	Date <u>3-3-08</u> Time <u>4:00</u> <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Signature of U.S. Marshal or Deputy <u>R. V. Burt</u>	

Service Fee <u>45.00</u>	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges <u>45.00</u>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:
Fwd: F. Lee for assignments 3/3/08

1 Deputy, 2 miles, 1 hr. RVB

PRINT 5 COPIES:	1. CLERK OF THE COURT 2. USMS RECORD 3. NOTICE OF SERVICE 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT	PRIOR EDITIONS MAY BE USED
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